

PATENT APPLICATION
Docket No.: 1020 6

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| In re application of: |  |   |          |
|-----------------------|--|---|----------|
|                       | Claude Jarakae Jensen, et al.                | ) |          |
| Serial No.:           | 09/839,433                                   | ) | Art Unit |
| Filed:                | April 20, 2001                               | ) | 1616     |
| For:                  | MORINDA CITRIFOLIA ENHANCED<br>LIP TREATMENT | ) |          |
| Examiner:             | Sharmila S. Gollamudi                        | ) |          |

## AMENDMENT AND REQUEST FOR CONTINUED EXAMINATION

**BOX: RCE** 

**Assistant Commissioner for Patents** 

Washington, D.C. 20231

Sir:

Applicant hereby respectfully requests continued examination of the above-referenced patent application, and provides this amendment as a submission and the payment of a fee pursuant to 37 C.F.R. §1.114. Accordingly, Applicant respectfully requests that the abovereferenced application be amended as follows:

## IN THE CLAIMS:

Applicant respectfully requests amending the claim set as provided below. (A version to show the changes made is provided herein.)

JAN 0 2 2003 E. Under the Paperwork Reduction A

1-3-3 -

RCE/ 1615 #10

PTO/SB/30 (10/2001) Approved for use through 10/31/2002 OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE of Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REQUEST** 

FOR

## CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:
Commissioner for Patents
Box RCE
Washington, DC 20231

| Application Number     | 09/839,433            |
|------------------------|-----------------------|
| Filing Date            | April 20, 2001        |
| First Named Inventor   | Claude Jarakae Jensen |
| Art Unit               | 1615                  |
| Examiner Name          | Sharmila S. Gollamudi |
| Attorney Docket Number | 10209.56              |

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

| 1. Submission required under 37 CFR §1.114   | or Reply Brief previously filed on Cormation Disclosure Statement (IDS)   |  |  |  |
|--|---|--|--|--|
| a.   Previously submitted  | 生身的   |  |  |  |
| i. Consider the amendment(s)/reply under 37 CFR §1.110   | 6 previously filed on   |  |  |  |
| (Any unentered amendment(s) referred to above will be  | entered).   |  |  |  |
| ii. 🔲 Consider the arguments in the Appeal Brief   | or Reply Brief previously filed on  |  |  |  |
| iii. 🛘 Other   |   |  |  |  |
| b. 🗵 Enclosed  |   |  |  |  |
| i. ⊠ Amendment/Reply iii. □ Info<br>ii. □ Affidavit(s)/Declaration(s) iv. □ Otl  |   |  |  |  |
| 2. Miscellaneous   |   |  |  |  |
| a.   Suspension of action on the above-identified approximately action on the above-identified approximately action.       | plication is requested under 37 CFR §1.103(c) for   |  |  |  |
| a period of months (Period of suspension shall n   | •   |  |  |  |
| b. 🔲 Other   | ·   |  |  |  |
| 3. Fees The RCE fee under 37 CFR §1.17(e) is required by 3   |   |  |  |  |
| a. 🗵 The Director is hereby authorized to charge the following fees, or credit any overpayments, to                        |   |  |  |  |
| Deposit Account No. 50-0843  |   |  |  |  |
| i. RCE fee required under 37 CFR §1.17(e)  |   |  |  |  |
| ii.  Extension of time fee (37 CFR §§1.136 and 1 iii.  Other   | .1/) V1/V0/2000 010111  |  |  |  |
|  | 01 FC:2801 5.00 CH 370.00 OP  |  |  |  |
| <ul> <li>b.  Check in the amount of \$ 370.00 encl</li> <li>c.  Payment by credit card (Form PTO-2038 enclosed)</li> </ul> | osea  |  |  |  |
| WARNING: Information on this form may becom  | e public. Credit card information should not  |  |  |  |
| be included on this form. Provide credit card inf  |   |  |  |  |
| SIGNATURE OF APPLICANT, A  | TORNEY, OR AGENT REQUIRED   |  |  |  |
| Name (Print / Type) Might F. Kreger  | Registration No. (Attorney / Agent) 35,232  |  |  |  |
| Signature / M  | Date January 2, 2003  |  |  |  |
| CERTIFICATE OF MAIL  | ING OR TRANSMISSION   |  |  |  |
| I hereby certify that this correspondence is being deposited with the Ur   |   |  |  |  |
| an envelope addressed to: Commissioner For Patents, Box RCE, War<br>andTrademark   | shington, DC 20231, or facsimile transmitted to the U.S. Patent   |  |  |  |
|  |   |  |  |  |
| Name (Print / Type) Michael F. Hiteger   |   |  |  |  |
| 1 118243 1291 .  | · · · · · · · · · · · · · · · · · · ·   |  |  |  |
| Signature  | Date January 2, 2003  Time will vary depending upon the needs of the individual case. Any comments on hief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. Fees and Completed Forms to the following address: Assistant Commissioner for |  |  |  |